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CERTIFICATE OF FACSIMILE TRANSMISSION TO THE UNITED STATES PATENT AND TRADEMARK OFFICE

DATE: January 18, 2006

TO: Examiner Ciric	:	*RE: U.S. Patent Application*
Art Unit: 3753	:	*Serial No.: 09/589,330*
Fax: (571) 273-4909	:	*Applicant: Chastine et al.*
From: Eric T. Krischke	:	*Atty. Dkt. No.: 9D-HR-19236*

DOCUMENTS SUBMITTED WITH TRANSMISSION:
Amendment Transmittal (3 pages)
Supplemental Amendment in Response to Office Action dated November 15, 2005 (12 pages)
Certificate of Facsimile Transmission (1 page)

Total pages including cover page: 16
If all pages are not received, please contact: LaDonna Hopson at Ext. 7440

RE: The above referenced U.S. Patent Application
Title: REFRIGERATOR WITH QUICK CHILL AND THAW SYSTEM
Filed: June 7, 2000

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that these papers are being facsimile transmitted to the U.S. Patent and Trademark Office, Facsimile Number Fax No. (571) 273-4909 on the date shown above.

Eric T. Krischke

Eric T. Krischke, Reg. No.: 42,769

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PATENT
Attorney Docket No.: 9D-HR-19236

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Chastine, et. al.	:	
		:	Art Unit: 3753
Serial No.:	09/589,330	:	
		:	Examiner: Ciric, Ljiliana V.
Filed:	June 7, 2000	:	
		:	
For:	REFRIGERATOR WITH QUICK CHILL AND THAW SYSTEM	:	

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

Transmitted herewith is:

- Supplemental Amendment in Response to Office Action dated November 15, 2005, (12 pages)
- Certificate of Facsimile Transmission (1 page)

STATUS

2. Applicant
 _____ claims small entity status.
 X is other than a small entity.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. 1.8a)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING
deposited with the United States Postal Service Express Mail Label No. addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Date: January 18, 2006

FACSIMILE
X transmitted by facsimile to the Patent and Trademark Office *Via Facsimile: (571) 273-4909*

Eric T. Krischke

Eric T. Krischke
Reg No. 42,769

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

(a) ____ Applicant petitions for an extension of time under 37 C.F.R. 1.136
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
___ first month	$ 110.00	$ 55.00
___ second month	$ 420.00	$ 210.00
___ third month	$ 950.00	$ 475.00
___ fourth month	$1,480.00	$ 740.00
___ fifth month	$2,010.00	$ 1,005.00

Fee: _____

If an additional extension of time is required, please consider this a petition therefor.

(Check and complete the next item, if applicable)

___ An extension of _____ months has already been secured. The fee paid therefor $_____ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request $_____.

OR

(b) X Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NO. PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA	SMALL ENTITY ADDITIONAL RATE FEE	OR	OTHER THAN SMALL ENTITY ADDITIONAL RATE FEE	
TOTAL INDEP.		MINUS		= 0	x $9 = $		x $18 = 0	
		MINUS		=	x $43 = $		x $86 =	
__	FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ $140 = $			+ $280 = $
					TOTAL ADDITIONAL FEE $		OR	TOTAL ADDITIONAL FEE

(a) X No additional fee for Claims is required

OR

(b) _____ Total additional fee for claims required $____

FEE PAYMENT

5. _____ Attached is a check in the sum of $_____

_____ Charge Deposit Account No. 01-2384 the sum of $_____.
A duplicate of this transmittal is attached.

FEE DEFICIENCY

6. X If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

AND/OR

X If any additional fee for claims is required, charge Deposit Account No. 01-2384.

7. _____ Other:

Eric T. Krischke

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